

PREVENTING AND ADDRESSING WORKPLACE VIOLENCE

February 19, 2026

Lyndsey N. Krownapple



CRITCHFIELD

INTRODUCTION



Lyndsey Krownapple, Associate
Critchfield, Critchfield, & Johnston, Ltd.
10 S. Gay Street, Mount Vernon, OH
740-397-4040

Krownapple@ccj.com



WORKPLACE VIOLENCE STATISTICS

- Nearly 2 million U.S. workers report being victims of workplace violence each year (OSHA estimate).
- Workplace violence accounts for about 9% of all fatal occupational injuries in the U.S. (BLS, 2023)
- Over 400 workplace homicides occur annually, and tens of thousands more suffer nonfatal assaults requiring medical treatment.
- Women experience two-thirds of nonfatal assaults, while men make up about 80% of workplace homicides.

WHAT IS WORKPLACE VIOLENCE?

DEFINITIONS:

The National Institute for Occupational Safety and Health (NIOSH):

" ... any physical assault, threatening behavior, or verbal abuse occurring in the work setting" (NIOSH, 1996).

The World Health Organization (WHO):

" ... incidents where staff are abused, threatened or assaulted in circumstances related to their work, including commuting to and from work, involving an explicit or implicit challenge to their safety, well-being or health" (ILO, ICN, WHO, & PSI, 2002).

WHAT IS WORKPLACE VIOLENCE?

But unlike harassment, conduct does not need to be based upon a protected class in order to be workplace violence.

WHAT IS WORKPLACE VIOLENCE?



Shoving, hitting, punching, kicking, and spitting are all clearly examples of physical workplace violence.

But sometimes, the situation isn't always so clear. And applying those definitions of workplace violence in real time, can sometimes be difficult.

WHAT IS WORKPLACE VIOLENCE?

- Verbal threats of physical violence are also workplace violence.

WHAT IS/IS NOT WORKPLACE VIOLENCE?

- Behavior like sarcasm, demeaning language, close talking, or yelling is certainly difficult behavior, but generally does not amount to violence.
- Some behaviors may be unpleasant, disruptive, or unprofessional, but they don't rise to the level of workplace violence unless there's a clear threat, intimidation, or act of physical harm.

TYPES OF WORKPLACE VIOLENCE?

- There are 4 types of workplace violence:
 - Criminal Intent
 - Customer/Visitor
 - Worker-on-Worker
 - Personal Relationship

TYPES OF WORKPLACE VIOLENCE?

Type 1: Criminal Intent

In Type 1 violence, the perpetrator has no legitimate relationship to the business or its employees, and is usually committing a crime in conjunction with the violence (robbery, shoplifting, trespassing).

For example:

- A convenience store clerk is assaulted during a robbery.
- A nurse is assaulted in the hospital parking garage during a car break-in.
- A delivery driver is assaulted in a road rage incident.

TYPES OF WORKPLACE VIOLENCE?

Type 2: Customer/Visitor

- Type 2 violence occurs when the perpetrator is someone receiving services from the workplace, such as a patient, customer, student, or member of the public.
- Examples:
 - A patient punches a nurse during a procedure.
 - An angry parent yells and throws a chair during a meeting with a teacher about their child's grades.
 - A customer spits on a cashier after being denied a refund.

TYPES OF WORKPLACE VIOLENCE?

Type 3: Worker-on-Worker

- The perpetrator is a current or former employee, supervisor, or coworker.
- Examples:
 - An employee sends threatening emails to a colleague after a negative performance review.
 - Two delivery drivers get into a physical altercation over route assignments.
 - A manager shoves a cashier during an argument about closing duties.

TYPES OF WORKPLACE VIOLENCE?

Type 4: Personal Relationship

- The perpetrator has a relationship to the employee outside of work that spills over to the work environment.
- For example, the husband of an employee follows her to work, orders her home and threatens her, with implications for not only this employee but also for her coworkers and residents.

WORKPLACE VIOLENCE RISK BY INDUSTRY

<u>Industry</u>	<u>% of Nonfatal Violence Injuries</u>	<u>Common Type(s)</u>	<u>Notes</u>
Healthcare & Social Assistance	~73%	Type 2 (Client/Patient)	Highest overall risk
Education	~15%	Type 2 (Student/Parent)	Rising post-pandemic
Retail & Food Service	~6%	Type 1 (Criminal Intent), Type 2	Frequent robberies, customer aggression
Public Administration/Government	~5x higher rate than private sector	Type 2	Includes social services, corrections
Transportation/Delivery	~10% of workplace homicides	Type 1	Isolated and cash-handling jobs
Office/Corporate	Low physical, moderate verbal	Type 3, Type 4	Bullying, coworker conflict, domestic spillover

VIOLENCE PREVENTION STRATEGIES

Strategies for *PREVENTING* Violence:

- Conduct a risk assessment and optimize the working environment
- Employee training
- Understand the stages of crisis development and know how to identify when workplace violence may be imminent
- Verbal de-escalation techniques
- Create an incident response plan
- Complete post-incident reports and review for potential improvement of procedures.

VIOLENCE PREVENTION STRATEGIES – RISK ASSESSMENTS

- Conduct worksite-specific risk assessments:
 - Environmental controls such as securing entrances/exits, cameras, panic buttons
 - Locations, tasks, and times when violence risk increases (e.g., shift change, check-in areas, billing disputes).
- Track past incidents to identify patterns.
- Consider factors like:
 - Staffing levels and wait times
 - Enclosed spaces or isolated work areas
 - High-stress services (e.g., behavioral health, customer complaints)

VIOLENCE PREVENTION STRATEGIES – EMPLOYEE TRAINING

- Equip staff with awareness and de-escalation skills.
- Make sure that staff members know emergency protocols, such as when and how to alert security or law enforcement.
- Develop a zero-tolerance policy for workplace violence and foster a culture of respect and civility.

NIOSH'S INTERVENTION STRATEGIES

In this section we will review tips for:

- Understanding the Stages of Crisis Development
- Early & Middle Stage Crisis Development Intervention Strategies
- Late Stage Crisis Development Intervention Strategies
- Power and Control Dynamics
- Crisis Interventions
- Goals of Crisis Resolution

NIOSH'S INTERVENTION STRATEGIES

Understanding the Stages of Crisis Development

Crisis doesn't occur spontaneously.

It is the final stage along a continuum of behavioral and emotional responses.

NIOSH'S INTERVENTION STRATEGIES

Understanding the Stages of Crisis Development

There are 4 stages of crisis development (the way a situation turns into a crisis):

Stage 1: Normal stress and anxiety level

Stage 2: Rising anxiety level

Stage 3: Severe stress and anxiety level

Stage 4: Crisis

NIOSH'S INTERVENTION STRATEGIES

Understanding the Stages of Crisis Development

Stage 1: Normal stress and anxiety level

- This is the background of crisis development brought about by the minor annoyances and frustrations of everyday life.
- Individuals at this stage are rational and in control of their emotions and behavior.

NIOSH'S INTERVENTION STRATEGIES

Understanding the Stages of Crisis Development

Stage 2: Rising anxiety level

- A heightened condition typically including rapid heart rate and respiration.
- The person might appear lost or confused about how to solve a problem.
- The person's voice might be pitched higher than usual or quaver with accelerated speech patterns.
- Small nervous habits such as finger or foot tapping may be manifested.

NIOSH'S INTERVENTION STRATEGIES

Understanding the Stages of Crisis Development

Stage 3: Severe stress and anxiety level

- A person's reasoning capacity is seriously diminished, with fixation on the here and now.
- Behavior typically becomes boisterous or disruptive.
- Communication may include shouting, swearing, argumentation, and threats.
- Physical indications include pacing, clenched fists, perspiring, and rapid shallow breathing.

NIOSH'S INTERVENTION STRATEGIES

Understanding the Stages of Crisis Development

Stage 4: CRISIS

- The crisis stage is characterized by unbearable anxiety and loss of cognitive, emotional, and behavioral control, with urgent need to end the emotional pain.
- A person in crisis is unable to solve problems or process information rationally without help.
- Behaviors of persons in crisis are erratic and unpredictable to a point that they may pose a danger to themselves and others.

NIOSH'S INTERVENTION STRATEGIES

Intervention Strategies:

Early & Middle Stage

Late Stage

NIOSH'S INTERVENTION STRATEGIES

Early & Middle Stage Crisis Development Intervention Strategies

Verbal Skills

Your words and demeanor have the power to defuse tensions

So be attuned to your:

- tone of voice
- choice of words
- body language

NIOSH'S INTERVENTION STRATEGIES

Early & Middle Stage Crisis Development Intervention Strategies

Examples of how Verbal Skills can defuse an early/mid-stage crisis:

- Allow the person to express concern.
 - "Please tell me what's bothering you."
- Use a shared problem-solving approach.
 - "How can we correct this problem?"
 - "I understand how frustrating this must be for you."
- Avoid being defensive or contradictory. This only exacerbates a tense situation.
- Apologize if appropriate.
 - "I'm sorry this happened. Let's find a way to fix it."

NIOSH'S INTERVENTION STRATEGIES

Early & Middle Stage Crisis Development Intervention Strategies

Examples of how Verbal Skills can defuse an early/mid-stage crisis (cont'd):

- Follow through with their problem.
 - "I'm going to bring this to my supervisor immediately."
- Avoid blaming others or "It's not my job."
 - "Let me get someone who can help you with this problem."
- Be alert to early signs of a resident's rising anxiety; perhaps offer an empathic inquiry such as:
 - "You seem to be upset ... can you tell me what's troubling you?"

NIOSH'S INTERVENTION STRATEGIES

Late Stage Crisis Development Intervention Strategies

Take Precautions:

- At later stages along the Crisis Continuum a person may begin showing signs of loss of self-control and problem-solving ability.
- Verbal and non-verbal interventions can still be effective but additional techniques and precautions should be taken.

Your focus now turns to protecting yourself and those around you.

- Don't go it alone, enlist the help of Security or colleagues. Be prepared to physically remove yourself if necessary. Position yourself to exit easily. Remove other residents or visitors from the room. If the person continues to escalate, follow your organization's procedure for immediate response to violent behavior.

NIOSH'S INTERVENTION STRATEGIES

Late Stage Crisis Development Intervention Strategies

Set Limits:

Limit-setting techniques, properly applied, can help by placing some external control on the escalating situation, defusing it and facilitating decision-making.

- "Mr. Jones, please control yourself and sit down, otherwise I will have to call security."

NIOSH'S INTERVENTION STRATEGIES

Late Stage Crisis Development Intervention Strategies

Set Limits:

The keys to effective limit setting are:

- 1) Using a command form to express the desired behavior; and
- 2) Providing a logical and enforceable consequence for non-compliance.
- 3) Continuing to acknowledge the agitated person's feelings and be empathic, reminding them that you're there to help (Lancee, Gallop, McCay, & Toner, 1995).

NIOSH'S INTERVENTION STRATEGIES

Late Stage Crisis Development Intervention Strategies

Set Limits:

- Do not confuse setting limits with issuing threats which can signal to the perpetrator that the situation is more hopeless than they had perceived, and may precipitate a violent response.
- Also, avoid arguing, as that may precipitate a violent resolution of crisis.

NIOSH'S INTERVENTION STRATEGIES

Late Stage Crisis Development Intervention Strategies

Set Limits:

Limits v. Threats

Threat: "If you don't stop I'm going to call security!"

Limit Setting: "Please sit down. I don't want to involve security, but I may have to if you can't control yourself."

Threat: "If you keep pushing the call button like that I won't help you."

Limit Setting: "Ms. Ferris, I know you need help, but please don't ring your call like that, and give me a chance to get to your room."

Threat: "That type of behavior won't be tolerated!"

Limit Setting: "Mr. Jones, would you please stop yelling and screaming at me ... I'm trying to help you."

NIOSH'S INTERVENTION STRATEGIES

Power and Control Dynamics

It is important that you recognize power and control tactics in yourself.

- Consider both your external presentation to others as well as how you react internally and emotionally to stressful stimuli.
- Be aware of your own level of anxiety, fatigue, illness, as well as your beliefs and biases.
- The goal is to respond thoughtfully and deliberately when such situations arise.

VIOLENCE PREVENTION STRATEGIES – DEESCALATION

Be Aware of Your Own Responses

Part of violence prevention is to be aware of your own feelings, responses, and sensitivities.

Pay attention to your instincts. For example, your "fight or flight" response can be an early warning sign of impending danger, to get help or get out.

VIOLENCE PREVENTION STRATEGIES - DEESCALATION

Be Aware of Your Own Responses

Be aware that the way you express yourself can have a significant effect on how others respond to you. Those who know you well may respond very differently than do strangers.

Effective communication skills are an essential tool in violence prevention.

VIOLENCE PREVENTION STRATEGIES - DEESCALATION

Be Aware of Your Own Responses

Self-awareness includes acknowledging if you have a personal history of abuse which might affect how you respond to situations that may spark flashbacks to your own past experiences.

If your coworkers are engaging in abusive behaviors, look within yourself as to whether you are exhibiting any of the same behaviors.

VIOLENCE PREVENTION STRATEGIES - DEESCALATION

Be Aware of Your Own Responses

Finally, fatigue can diminish your alertness and ability to respond appropriately to a challenging situation. If you are fatigued, be on high alert and try to calm yourself before responding.

VIOLENCE PREVENTION STRATEGIES - DEESCALATION

Check Your Cultural Biases

A key aspect of self-awareness is recognizing how our own particular cultural heritage, values, and belief systems affect how we respond to customers, patients, colleagues and visitors and how they, in turn, respond to us.

- For example, misunderstandings stemming from language barriers can increase a medical patient's anxiety to a point where physical attacks on staff are the only way to communicate one's pain, acute emotional distress, and the need to be understood (Hoff & Morgan, 2011).

POST-INCIDENT RESPONSE

Following an incident of violence, key actions include:

- File an incident report and participate willingly in employer investigative actions.
- Report any injuries (physical or emotional) through appropriate channels and medical attention if appropriate.
- Work with your employer to develop or adjust protocols for the particular individual or situation to prevent further incidents of workplace violence.

POST-INCIDENT RESPONSE: INVESTIGATIONS

- Before investigating, employers must stabilize the situation.
 - Separate the involved employees immediately to prevent further conflict.
 - If there's a credible threat, remove the alleged aggressor from the workplace (paid administrative leave is often appropriate).
 - Involve security or law enforcement if physical violence, threats, or weapons are involved.
 - Provide first aid or medical attention as needed.

POST-INCIDENT RESPONSE: INVESTIGATIONS

- Preserve and document evidence early.
 - Secure any physical evidence (e.g., damaged property, video footage, written notes).
 - Take photos if appropriate.
 - Identify and list potential witnesses immediately.
 - Instruct all parties not to discuss the incident to prevent retaliation or rumor-spreading.
 - Document who reported, when, and what was said verbatim, if possible.

POST-INCIDENT RESPONSE: INVESTIGATIONS

- Conduct confidential, structured interviews
 - Meet separately with the complainant, accused, and witnesses
 - Maintain confidentiality and share only on a need to know basis
 - Ask open-ended questions
 - “Tell me what happened, from your perspective.”
 - “What led up to the incident?”
 - “Who else was present?”
 - Take detailed notes and/or ask interviewees to provide written statements.

POST-INCIDENT RESPONSE: INVESTIGATIONS

- Evaluate evidence objectively
 - Consider:
 - Consistency of stories between witnesses.
 - Credibility (level of detail, corroboration).
 - Any physical or digital evidence (texts, emails, video).
 - Whether conduct violated company policy (even if it didn't meet the legal definition of "violence").

POST-INCIDENT RESPONSE: INVESTIGATIONS

- Take prompt, proportionate action
 - Options:
 - Verbal or written warning
 - Suspension or reassignment
 - Termination (if serious or repeated)
 - Mandated training or counseling
 - Avoid:
 - Transferring or punishing the victim
 - Allowing ongoing contact if intimidation continues
 - The response must match the severity and risk of the behavior.



QUESTIONS



CRITCHFIELD

THANK YOU!

CRITCHFIELD, CRITCHFIELD & JOHNSTON, LTD.

DISCLAIMER

The information provided in this presentation is meant only to be informative and is in no way suggested to replace an individualized legal consultation or representation.

CRITCHFIELD